



# TOWN OF WILMINGTON

121 GLEN ROAD  
WILMINGTON, MA 01887

## OFFICE OF THE TOWN TREASURER/TAX COLLECTOR

Pamela L. MacKenzie  
Treasurer/Collector

T: (978) 658-3531  
F: (978) 988-1054

### ABANDONED AND UNCLAIMED FUNDS FORM

Date Issued:

Name on Check:

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Name and Address of Claimant (please print)

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Claimant must sign below. Under penalties of perjury, I declare that my claim of ownership of these funds is absolute, and complete.

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Executor (if applicable)

\_\_\_\_\_  
Date

(      )  
\_\_\_\_\_  
Telephone Number

You must provide your name, address, telephone number, and signature for your claim to be processed. If payee of unclaimed funds is deceased, please provide evidence that all claimant(s) are authorized executor(s) of the estate. **If all evidence requested by the Treasurer is not received, this claim will not be paid. The Town of Wilmington reserves the right to require additional information it deems necessary to substantiate a claim.**

An original signature is required. Electronic copies, photocopies, and faxed copies will not be accepted.

\_\_\_\_\_  
(FOR OFFICE USE ONLY to be completed by Treasurer's Office)

Check Number:

Date:

Amount: